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UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No. 60,126-227	
		First Inventor Harry Krumma, et al.	
		Title	AXIAL SHAPING AIR DESIGN FOR PAINT ATOMIZER
		Express Mail Label No.	EV318930954US
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages (12)] <i>(preferred arrangement set forth below)</i> Descriptive title of the invention Cross reference to related applications Statement regarding Fed sponsored R & D Reference to sequence listing, a table, or a Computer program listing appendix Background of the Invention Brief Summary of the invention Brief Description of the Drawings Detailed description Claim(s) Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets (1)] 5. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages (4)] a. <input checked="" type="checkbox"/> Unexecuted (original copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identify of above copies	
		ACCOMPANYING APPLICATION PARTS	
		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input checked="" type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Copies of IDS (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and Certification under 35 USC 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: <u>Check for the payment of the filing fee</u>	
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data sheet under 37 CFR. 76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: ____/____ Prior application information: Examiner: _____ Group Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
19. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here) <div style="text-align: center; font-size: 1.2em;">27305</div>	
		or <input type="checkbox"/> Correspondence address below	
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/Type) Gregory D. DeGrazia		Registration No. (Attorney/Agent) 48,944	
Signature 		Date July 22, 2003	

 19249 U.S. PTO
 10/624586
 07/22/03

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231




CERTIFICATE OF EXPRESS MAILING

I hereby certify that the enclosed **PATENT APPLICATION** and fee are being deposited with the United States Postal Service as Express Mail, postage prepaid, in an envelope as "Express Mail Post Office to Addressee", Mailing Label No. **EV318930954US** and addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on **July 22, 2003**.



Tracy L. Smith

7/22/03 U.S. PTO	FEE TRANSMITTAL for FY 2003 <i>Patent fees are subject to annual revision.</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">Complete if Known</th> </tr> <tr> <td style="width: 50%;">Application Number</td> <td>Herewith</td> </tr> <tr> <td>Filing Date</td> <td>July 22, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Harry Krumma, et al.</td> </tr> <tr> <td>Examiner Name</td> <td>Not Yet Assigned</td> </tr> <tr> <td>Group / Art Unit</td> <td>Not Yet Assigned</td> </tr> <tr> <td>Attorney Docket No.</td> <td>60,126-227</td> </tr> </table>	Complete if Known		Application Number	Herewith	Filing Date	July 22, 2003	First Named Inventor	Harry Krumma, et al.	Examiner Name	Not Yet Assigned	Group / Art Unit	Not Yet Assigned	Attorney Docket No.	60,126-227
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METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																														
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account No. 08-2789</p> <p>Deposit Account Name Howard & Howard Attorneys</p> <p>Charge Any Additional Fee Required <input checked="" type="checkbox"/> Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 127</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<p>3. 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+ Typed or Printed Name	Gregory D. DeGrazia	Registration No. (Attorney/Agent)	48,944	Telephone	(248) 645-1483																																																																																																																																																																																										
Signature				Date	July 22, 2003																																																																																																																																																																																										

[Handwritten:] AN 02 21 60, 126-227

German Patent and Trademark Office

(1) In address list street, house no. and PO box if appl.

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v. Bezold & Sozien [stamp: Received
Patent Attorneys July 26, 2002
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Request
for Granting
of a Patent

1

☐ FAX in advance, datedFile No. (issued by German Patent and Trademark Office)
102 33 198.7(2) Reference of Applicant/Agent (max. 20 chars.)
15796 H/skTelephone of Applicant/Agent
089/38 999 80Date:
July 22, 2002(3) The recipient in Field (1) is the
☐ Applicant ☒ Authorized Recipient of Service ☒ Agent Provide No. of General Power of Attorney, if appl.

(4) Fill out only if different from field (1)

Applicant
Dürr Systems GmbH
Otto-Dürr-Straße 9
70435 Stuttgart

Agent

List Commercial Register No. Only for corporations

☐ The applicant is listed in Commercial Register No. _____ at the Municipal Court of

(5) so far as known

Applicant Code No.

Agent Code No.

Service Address Code No.

ABT

ERF

263 109

(6) See also reverse IPC proposal to be listed if known

Title of the Invention

Rotary Atomizer

Applicant's proposed IPC

(7) See explanations and cost schedule on reverse

Other requests

File No. of Main Application (Main Patent)

- ☐ The application is an **addition** to patent application (patent) →
- ☐ **Examination request** — Examination of application with ascertainment of published prior art (§ 44 Patent Act)
- ☐ **Search request** — Ascertainment of published prior art without examination (§ 43 Patent Act)
- ☐ **Supply of copies** of ascertained publications in ☐ examination proceedings ☐ search proceedings
- ☐ **Postponement** of announcement of the grant for _____ months (§49, Subs. 2 Patent Act)
(Max. 15 mo after filing or priority date)

(8) **Declarations**

File No. of Parent Application

- ☐ **Division/Exclusion** from patent application →
- ☐ Interested in **licensing** (not binding)
- ☐ Consent to **early disclosure** and thus free access to the files (§ 31, Subs. 2 (1) Patent Act)

(9)

- ☐ **Domestic Priority** (Date, File No. of prior application)
- ☐ **Foreign Priority** (Date, Country, File No. of prior application; attach complete copies of foreign prior application)

See reverse as well

Fee payment in the amount of EUR 60☒ **Automatic transfer**
Form (A9507) is attached☐ **Wire transfer** (after receipt
of confirmation of service)☐ **Debit** from my/our debit account at Dresdener
Bank AG, Munich
Debit order (V 1244) is attached

If the application fee is not paid within 3 months after the filing date, the application is considered rescinded

(10) Explanation and cost schedule, see reverse

Attachments5. 4 Page(s) of claims

1. _____ Agent power of attorney

6. 16 Number of claims

2. _____ Identification of inventor

7. 1 Sheet of drawings3. 1 Abstract (opt. with
drawing Fig. _____)

8. _____ Copies of prior appl.

4. 8 Page(s) of description (opt.
with list of ref. numerals)

9. _____ Cited nonpatent lit.

Wolfgang Heusler, Patent Attorney

(12) Signatures

[Stamp: German Patent and Trademark Office]

To be filled out only by the accepting office

- ☐ This patent application was received on the date indicated by perforations at the German Patent and Trademark Office. It received the file number/numbers:
- ☐ This file number is to be used in all submissions. For payments, the file number and the purpose in the form of a fee code (see reverse) are to be noted.

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